

STATE OF NEVADA
COMMISSION ON MINERAL RESOURCES

DIVISION OF MINERALS

400 W. King Street, Suite 106
Carson City, Nevada 89703
(775) 684-7040 | Fax (775) 684-7052

APPLICATION FOR PERMIT TO DRILL AN OIL OR GAS WELL

(Application must be accompanied by \$200 permit fee. Submit proposed drilling program with this application.)

Company/Operator _____

Send permit to:

Street/ PO Box _____

City _____ State _____

Zip _____ Telephone _____

Lease name _____ Split Estate? ☐ Yes ☐ No

WELL LOCATION

Section _____

Locate well correctly.

Well No. _____ within the _____ Q _____ Q

Sec _____, T. _____, R. _____ M.D.B.M.

UTM Northing _____ N; UTM Easting _____ E (NAD83 Datum)

Field _____,

County _____

The well is _____ feet from (N) (S) line and
and _____ feet from (E) (W) line of the section.

(Give location from section line, cross out wrong directions.)

Distance and direction from nearest town _____

If patented land, Fee Owner is _____

Fee Owner Address _____

If government land, lease serial No. is _____

Land Type: ☐ Federal (BLM, USFS, etc.) ☐ Private ☐ State

Lessee is _____

Address _____

Is the proposed well being considered for unconventional well stimulation? ☐ No ☐ Yes

It is proposed to drill the well to a depth of _____ feet using a rotary rig.

The elevation is _____ feet above sea level.

The KB will be _____.

If this is a wildcat well, attach plat by licensed surveyor showing location.

The status of a bond for this well is conformance with NRS 522.230 of the Nevada Revised Statutes is:

If bond posted with U.S. Government, what is name of surety company?

Bond number? _____

Please be advised: NAC 522.540 Confidentiality of well records. 1. Records concerning a well will not be kept confidential by the division unless the owner of the well requests confidentiality in writing or marks "confidential" on the logs of an exploratory well. Upon receiving such a request or log, the division will keep the records confidential for 6 months after their receipt unless the owner provides a written authorization for an earlier release.

I certify that I have personal knowledge of the facts above stated and that they are true, correct, and complete.

Signed _____
 Name _____
 Position _____
 Date _____, 20____

Permit No. _____
 API No. _____
 Approval Date _____
 By _____

CONDITIONS OF PERMIT

1. Please send daily drilling reports to : Lowell Price.....lprice@govmail.state.nv.us
 and
 Lindalwells@govmail.state.nv.us
2. See attached "Conditions of Approval."
3. Additional Conditions/Comments

A.	
B.	
C.	

This permit does not extend the permittee the right of ingress and egress on public, private or corporate lands.

The issuance of this permit does not waive the requirements that the permit holder obtain other permits from State, Federal, and local agencies.